

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 486 OF 486  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>INTERNATIONAL ASSOCIATION OF FIREFIGHTERS INTERESTED IN REGISTRATION AND EDUCATION PAC</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00029447
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>Financial Innovations</b> [MEMO ITEM]		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 16 / 2014</b>	
Mailing Address One Weingeroff Boulevard		Amount <b>362.68</b>	
City Cranston	State RI	Zip Code 02910	Transaction ID : <b>D26967</b>
Purpose of Expenditure Banner	Category/Type 007	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 08 / 2014</b>	
Name of Federal Candidate Alison Lundergan Grimes		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		<b>1426.93</b>	

Full Name of Payee <b>Financial Innovations</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>07 / 16 / 2014</b>	
Mailing Address One Weingeroff Boulevard		Amount <b>1064.25</b>	
City Cranston	State RI	Zip Code 02910	Transaction ID : <b>D26966</b>
Purpose of Expenditure Rally Signs	Category/Type 007	Date of Disbursement or Obligation MM / DD / YYYY <b>07 / 31 / 2014</b>	
Name of Federal Candidate Alison Lundergan Grimes		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <b>KY</b>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶	
		<b>1426.93</b>	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<b>1064.25</b>
(b) SUBTOTAL of Unitemized Independent Expenditures ..... ▶	
(c) TOTAL Independent Expenditures..... ▶	<b>1064.25</b>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas H. Miller

[Electronically Filed]

Date

MM / DD / YYYY  
**08 / 20 / 2014**

Signature